

Twin Registry. This paragraph omits the significance of investigation of twins. The two sentences are correct but the significance is not discussed for the benefit of the general reader. A portion of the Conclusions of (20) Cederlof et al. is as follows:

/ The results obtained from group A, including only *one* twin from each pair, regardless of smoking habits, are, from the constitutional point of view, as heterogeneous as "normal material." These results reveal a marked association between smoking and symptoms. Thus, "angina pectoris" occurred throughout, to a greater extent among smokers than among nonsmokers, as did the different degrees of bronchial symptoms.

In regard to respiratory symptoms, the findings are fully in accord with previously reported experience.¹

The question of hypermorbidity among smokers in regard to coronary disease has not received the same unanimous answer in published investigations. Extensive prospective studies of mortality from coronary disease, however, point unanimously to a connection with smoking.¹⁷⁻²¹ As for morbidity in angina pectoris among smokers, an early report from the Framingham study²² showed data that suggested an increased risk among men who smoked over 20 cigarettes per day. Later experience gained from the combined Albany and Framingham studies²⁰ have not verified an increased incidence of angina pectoris among smokers. A report published by the Health Insurance Plan of Greater New York on the incidence and prognosis of coronary disease found a clear hypermorbidity in angina pectoris among male smokers but not among women.²¹

Our material revealed a clear hypermorbidity in "angina pectoris" among male smokers in the series where genetic factors were uncontrolled (group A). A corresponding hypermorbidity could not be ascertained, however, when intrapair comparisons were

made between smoker and nonsmoker in discordant twin groups. This difference in morbidity between the groups cannot be accounted for by differences in degree of exposure to tobacco. This is shown by the factual data concerning tobacco consumption and by the fact that the same degree of hypermorbidity was found in smokers' respiratory symptoms. Therefore, it seems highly probable that factors other than exposure to tobacco were of decisive importance. One such possible factor could lie in the fact that the smokers in group A tended more than those in the B groups to be town dwellers. However, investigations carried out to date make such an interpretation highly improbable.²³

1005050627